



Bib Data Sheet


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SERIAL NUMBER 09/585,811	FILING DATE 05/31/2000 RULE _	CLASS 714	GROUP ART UNIT 2785	ATTORNEY DOCKET NO. NAI11P004/00.006.01						
APPLICANTS Daniel Joseph McIchionc, Beaverton, OR ; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/15/2000 _										
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		STATE OR COUNTRY OR	SHEETS DRAWING 4	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 5					
ADDRESS Kevin J Zilka P O Box 721030 San Jose ,CA 95172										
TITLE System, method and computer program product for process-based selection of virus detection actions										
FILING FEE RECEIVED 864	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: <table border="1"> <tr> <td><input type="checkbox"/> All Fees</td> </tr> <tr> <td><input type="checkbox"/> 1.16 Fees (Filing)</td> </tr> <tr> <td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td> </tr> <tr> <td><input type="checkbox"/> 1.18 Fees (Issue)</td> </tr> <tr> <td><input type="checkbox"/> Other _____</td> </tr> <tr> <td><input type="checkbox"/> Credit</td> </tr> </table>				<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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CONFIRMATION NO. 4296

SERIAL NUMBER 09/585,811	FILING DATE 05/31/2000 RULE	CLASS 713	GROUP ART UNIT 2131	ATTORNEY DOCKET NO. NAI11P004/00.006.01	
APPLICANTS Daniel Joseph Melchione, Beaverton, OR; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED <i>CB</i> ** 08/15/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>Quigley</i> Examiner's Signature <i>CB</i> Initials		STATE OR COUNTRY OR	SHEETS DRAWING 4	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 5
ADDRESS 28875					
TITLE System, method and computer program product for process-based selection of virus detection actions					
FILING FEE RECEIVED 864	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		